

Welcome to Medicare



Ryan Ramsey

SHIP Volunteer Program Coordinator

First TN Area Agency on Aging & Disability

Who is TN SHIP

- State Health Insurance Assistance Program
- FREE, non-biased Medicare counseling service
- DO NOT sell insurance or represent any insurance company
- Contract with 8 AAADs, Family and Children Service, TN Disability Coalition & CenterStone
- 27 staff and 300 certified volunteers

What is Medicare?

- Health insurance for three groups of people
 - 65 and older
 - Under 65 with certain disabilities
 - Any age with End-Stage Renal Disease (ESRD)
- Administration
 - Centers for Medicare & Medicaid Services

Medicare Card

- Keep it and accept Medicare Parts A and B
- Return it to refuse Part B
 - Follow instructions on back of card

Front

MEDICARE			HEALTH INSURANCE	
1-800-MEDICARE (1-800-633-4227)				
NAME OF BENEFICIARY JANE DOE				
MEDICARE CLAIM NUMBER 000-00-0000-A	SEX FEMALE	SAMPLE		
IS ENTITLED TO HOSPITAL MEDICAL	EFFECTIVE DATE 07-01-1986			
	(PART A)	07-01-1986		
	(PART B)	07-01-1986		
SIGN HERE →	<i>Jane Doe</i>			

Back

1. Carry your card with you when you are away from home.
2. Let your hospital or doctor see your card when you require hospital, medical, or health services under Medicare.
3. Your card is good wherever you live in the United States.

WARNING: Issued only for use of the named beneficiary. Intentional misuse of this card is unlawful and will make the offender liable to penalty. If found, drop in nearest U.S. Mail box.


Centers for Medicare & Medicaid Services
 Baltimore, MD 21244-1850
 Form CMS-1968 (01/2002)

If you have questions about Medicare, call 1-800-MEDICARE (1-800-633-4227); TTY/TDD: 1-877-486-2048 or visit us at www.medicare.gov.

I DO NOT WANT MEDICAL INSURANCE Check Here

SIGN HERE	Written Signature (or Legal Representative)
	Signature by Mark (X) Must Be Witnessed
	Signature of Witness
	Address of Witness

If you DO NOT want Medical Insurance

1. Check the box above (top right), sign your name, and return the entire form in the enclosed envelope. Do NOT tear off the Medicare card. It would be improper to use it since you do not want Medical Insurance. You must return the form BEFORE the Medical Insurance effective date shown on the card.
2. Since you are entitled to Hospital Insurance even though you do not want Medical Insurance, we will send you a new card showing that you have Hospital Insurance only.

Four Parts of Medicare



Usually →



Part A

**Hospital
Insurance**

Part B

**Medical
Insurance**

Part C

**Medicare
Advantage**

Part D

**Medicare
Prescription
Drug
Coverage**

Medicare Options

Step 1 : Decide how you want to get your coverage

Original Medicare

Part A
Hospital
Insurance

Part B
Medicare
Insurance

Medicare Advantage Plan
Part C (HMO or PPO)

Part C
Combines Part A,
Part B and usually
Part D

Step 2 : Decide if you need drug coverage

Part D
Prescription Drugs

Step 2 : Decide if you need drug coverage

Part D
Prescription Drugs

or

Step 3 : Decide if you need Supplemental Coverage

Medicare Supplement
Insurance (Medigap Policy)

END

END
**You cannot be sold a
Medigap Policy**

Medicare Part A Helps Pay For

Hospital Stays	Semi-private room, meals, general nursing, and other hospital services and supplies. Includes care in critical access hospitals and inpatient rehabilitation facilities. Inpatient mental health care in psychiatric hospital (lifetime 190-day limit).
Skilled Nursing Facility Care	Semi-private room, meals, skilled nursing and rehabilitation services, and other services and supplies.
Home Health Care Services	Can include part-time or intermittent skilled care, and physical therapy, speech-language pathology, and occupational therapy.
Hospice Care	Includes drugs and medical, and support services from a Medicare-approved hospice.
Blood	In most cases, if you need blood as an inpatient, you won't have to pay for it or replace it.

If Not Automatically Enrolled Your 7-Month Initial Enrollment Period

No Delay

If you enroll in Part B

3 months before the month you turn 65

2 months before the month you turn 65

1 month before the month you turn 65

Delayed Start

The month you turn 65

1 month after you turn 65

2 months after you turn 65

3 months after you turn 65

Sign up early to avoid a delay in getting coverage for Part B services. To get Part B coverage the month you turn 65, you must sign up during the first three months before the month you turn 65.

If you wait until the last four months of your Initial Enrollment Period to sign up for Part B, your start date for coverage will be delayed.

Enrolling in Medicare Part B

Automatic Enrollment	<ul style="list-style-type: none">▪ If you already get Social Security, Railroad Retirement, or disability benefits▪ Must opt out if you don't want to be enrolled
Initial Enrollment Period (IEP)	<ul style="list-style-type: none">▪ 7 month period. Starts 3 months before month of eligibility, and includes the month you turn 65 and 3 months after the month you turn 65
General Enrollment Period (GEP)	<ul style="list-style-type: none">▪ January 1 through March 31 each year▪ Coverage effective July 1▪ Premium penalty<ul style="list-style-type: none">– 10% for each 12-month period eligible but not enrolled– Paid for as long as the person has Part B– Limited exceptions

Monthly Part B Premium

If your Yearly Income in 20011 was		You Pay
File Individual Tax Return	File Joint Tax Return	
\$85,000 or below	\$170,000 or below	\$104.90
\$85,001–\$107,000	\$170,001–\$214,000	\$146.90
\$107,001–\$160,000	\$214,001–\$320,000	\$209.80
\$160,001–\$214,000	\$320,001–\$428,000	\$272.70
above \$214,000	above \$428,000	\$335.70

Part B Coverage

- Doctors' services
- Outpatient medical/surgical services and supplies
- Diagnostic tests
- Outpatient therapy
- Outpatient mental health services
- Some preventive health care services
- Other medical services

Part B Covered Preventive Services

- “Welcome to Medicare” exam
- Yearly “Wellness” exam
- Abdominal aortic aneurysm screening*
- Bone mass measurement
- Cardiovascular disease screenings
- Colorectal cancer screenings
- Diabetes screenings
- Flu shots
- Glaucoma tests
- Hepatitis B shots
- HIV Screening
- Mammograms (screening)
- Pap test/pelvic exam/clinical breast exam
- Prostate cancer screening
- Pneumococcal pneumonia shots
- Smoking cessation

New in
2011

Preventative Services on pages 35-55 in the 2014 Medicare and You handbook

Part B and Employer or Union Coverage

- May affect your Part B enrollment rights
 - You may want to delay enrolling in Part B if
 - You have employer or union coverage and
 - You or your spouse, or family member if you are disabled, is still working
- See how your insurance works with Medicare
 - Contact your employer/union benefits administrator

When Employer or Union Coverage Ends

- When your employment ends
 - You may get a chance to elect COBRA (18 months)
 - You may get a Special Enrollment Period (8 months)
 - Sign up for Part B without a penalty

What's NOT Covered by Part A and Part B?

- Items and services Medicare doesn't cover include, but aren't limited to:
 - Long-term care
 - Routine dental care (with exceptions)
 - Dentures
 - Cosmetic surgery (with exceptions)
 - Acupuncture
 - Hearing aids and exams for fitting hearing aids

Medicare Drug Plan Costs

- Costs vary by plan
- In 2014, most people will pay
 - A monthly premium (average \$52.14)
 - A yearly deductible (Max. \$310)
 - Copayments or coinsurance
 - Donut Hole – starts \$2,850, ends \$4,550
 - 47.5% for covered brand-name drugs in coverage gap
 - 72% for covered generic drugs in coverage gap
- Extra Help if you have limited income/resources

When you can Join or Switch Medicare Prescription Drug Plans

Initial Enrollment Period (IEP)	<ul style="list-style-type: none">▪ 7 month period▪ Starts 3 months before month of eligibility
Annual Enrollment Period	October 15 – December 7 each year These are new dates 
Annual Medicare Advantage Disenrollment Period 	<ul style="list-style-type: none">▪ Between January 1–February 14, you can leave an MA plan and switch to Original Medicare. If you make this change, you may also join a Part D plan to add drug coverage. Coverage begins the first of the month after the plan gets the enrollment form.

Joining or Switching Part D Plans

Special Enrollment Periods (SEP)

- Examples of when you get an SEP include
 - You permanently move out of your plan's service area
 - You lose other creditable Rx coverage
 - You weren't adequately informed your other coverage was not creditable or was reduced and is no longer creditable
 - You enter, live in or leave a long-term care facility
 - You have a continuous SEP if you qualify for Extra Help

What is a Medigap policy?

- Private health insurance for individuals
- Sold by private insurance companies
 - Licensed by your state
- Supplements Original Medicare ONLY
- Follow Federal/state laws that protect you
- Must state “Medicare Supplement Insurance”

When is it best to buy a Medigap Plan?

- 6 Month Initial Enrollment Period
Starting the first month you are enrolled into Medicare Part B. No medical underwriting
- After Initial Enrollment Period
Subject to medical underwriting
Can be denied for pre-existing condition(s)
- Costs higher for beneficiaries under 65

Medigap Plans

How to read the chart:

If a check mark appears in a column of this chart, the Medigap policy covers 100% of the described benefit. If a row lists a percentage, the policy covers that percentage of the described benefit. If a row is blank, the policy doesn't cover that benefit. **Note:** The Medigap policy covers coinsurance only after you have paid the deductible (unless the Medigap policy also covers the deductible).

Medigap Benefits	Medigap Plans									
	A	B	C	D	F*	G	K	L	M	N
Medicare Part A Coinsurance and hospital costs up to an additional 365 days after Medicare benefits are used up	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Medicare Part B Coinsurance or Copayment	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓***
Blood (First 3 Pints)	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Part A Hospice Care Coinsurance or Copayment	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Skilled Nursing Facility Care Coinsurance			✓	✓	✓	✓	50%	75%	✓	✓
Medicare Part A Deductible		✓	✓	✓	✓	✓	50%	75%	50%	✓
Medicare Part B Deductible			✓		✓					
Medicare Part B Excess Charges					✓	✓				
Foreign Travel Emergency (Up to Plan Limits)			✓	✓	✓	✓			✓	✓
							Out-of-Pocket Limit**			
							\$4,660	\$2,330		

*Plan F also offers a high-deductible plan. If you choose this option, this means you must pay for Medicare-covered costs up to the deductible amount of \$2,070 in 2012 before your Medigap plan pays anything.

**After you meet your out-of-pocket yearly limit and your yearly Part B deductible (\$140 in 2012), the Medigap plan pays 100% of covered services for the rest of the calendar year.

***Plan N pays 100% of the Part B coinsurance, except for a copayment of up to \$20 for some office visits and up to a \$50 copayment for emergency room visits that don't result in an inpatient admission.

What is Not Covered by Medicare/Medigap

- Long-term care
- Vision and dental care
 - Including eyeglasses
- Hearing aids
- Private-duty nursing

Medicare Advantage Plan

- You are still in Medicare the program
- You still have Medicare rights and protections
- You still get regular Medicare-covered services
- You may get extra benefits
 - Such as vision, hearing, or dental care
- You may be able to get prescription drug coverage

How Medicare Advantage Plans Work

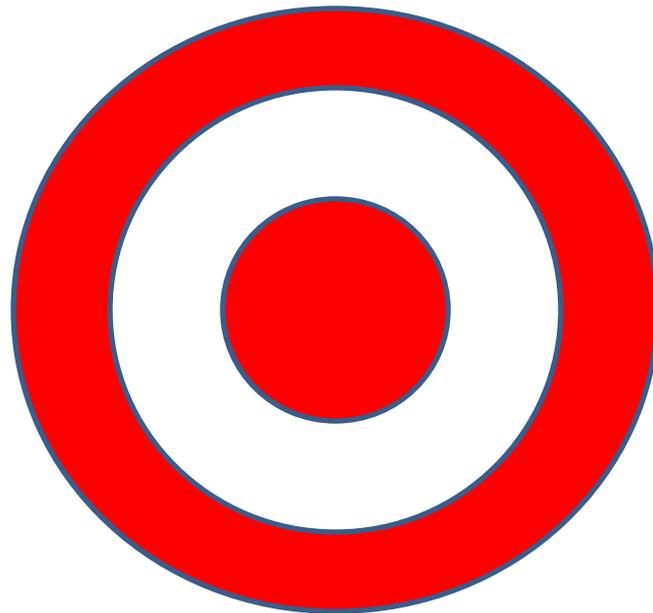
- You get Medicare-covered services through the plan
 - All Part A and Part B covered services
 - Some plan may provide additional benefits
- Most plans include prescription drug coverage
- May have to go to network doctors or hospitals
- Benefits and cost-sharing may be different than in Original Medicare

Types of Medicare Advantage Plans

Health Maintenance Organization (HMO)

Preferred Provider Organization (PPO)

Special Needs Plan (SNP)



When You Can Join or Switch MA Plans

Initial Enrollment Period	<ul style="list-style-type: none">▪ 7 month period begins 3 months before the month you turn 65
Annual Enrollment Period	<ul style="list-style-type: none">▪ October 15 – December 7▪ Coverage begins January 1 
Special Enrollment Period	<ul style="list-style-type: none">▪ Move from the plan service area<ul style="list-style-type: none">–And cannot stay in the plan▪ Plan leaves Medicare program▪ Other special situations

When You Can Drop an MA Plan

Medicare
Advantage
Disenrollment
Period

New in
2011

- Between January 1–February 14
- You can leave an MA plan
- Go back to Original Medicare
 - Coverage begins the first of the month after you leave MA plan
- If you make this change, you also may join a Part D Plan to add drug coverage
 - Drug coverage begins first of the month after the plan gets enrollment form
- Cannot join another MA plan during this period

Fraud, Waste and Abuse

Senior Medicare Patrol – Empowering Senior to
Prevent Health Care Fraud



1-866-836-7677

Protect-Detect-Report

\$199, \$299, \$399 Scam

- Telemarketing call
- Prescription Drug Card that covers all your Medications
- Ask for Medicare Number verification
- Ask for Bank information so they can withdrawal money.
- They may send a drug card to you, but it does not cover your medications.

New Medicare Card Scam

- Telemarketing Call
- Medicare has a new card that costs upwards of \$50
- If you do not purchase this card you will lose all your benefits
- Ask for Medicare Number and Banking Information
- Social Security does not charge for a Medicare Card or a replacement card.

Thank you!

Questions?